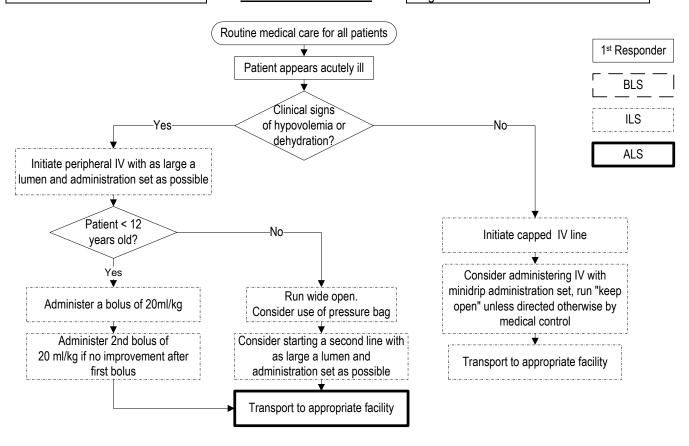
Initiated: 12/10/82 MILWAUKEE COUNTY EMS
Reviewed/revised: 7/1/11 STANDARD OF CARE
Revision: 16 PERIPHERAL IV LINES

Approved by: Ronald Pirrallo, MD, MHSA
Page 1 of 1



## Notes:

- Providers may establish an intravenous infusion in patients who appear acutely ill, either for safety purposes during transport or prior to contact with medical control.
- The only acceptable IV initiation sites are the upper extremity, lower leg and external jugular. NO femoral or central lines are to be initiated by EMS personnel.
- The use of chronic indwelling IV catheter lines with external ports (i.e. Hickman, Arrow) may be used prior to contacting medical control in immediate life threatening situations when another site cannot be obtained.
- Renal dialysis shunts may only be used if the patient is in cardiopulmonary arrest and no other IV site is available.
- For non-life threatening situations, use of an indwelling IV catheter requires permission from medical control.
- When accessing any indwelling IV line or shunt, consider enlisting the expertise of medical personnel, if present.
- If the patient has a fistula, shunt, etc., avoid using that arm altogether for IV access, except in life threatening situations
- An intraosseous line may be established in a patient with sign/symptoms of shock AND altered level of consciousness in whom an intravenous line cannot be initiated.
- The preferred order for administration of parenteral medications is: peripheral IV, IO, chronic indwelling catheter with external port, ET.